


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2004 08:00 AM
Secretary of State

| | |
|---|---|
| DOCUMENT # L70991 1. Entity Name K-2, INC. |  |
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| Principal Place of Business C/O WILLIAM K. SCRUGGS, JR. 656 N. BEAL PARKWAY FORT WALTON BEACH, FL 32547 | Mailing Address C/O WILLIAM K. SCRUGGS, JR. 656 N. BEAL PARKWAY FORT WALTON BEACH, FL 32547 |
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04292004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

| | |
|-----------------------------|-------------------------------|
| 4. FEI Number 59-3012943 | Applied For Not Applicable |
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| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |
|---|--------------------------------|

6. Name and Address of Current Registered Agent

SCRUGGS, WILLIAM K JR
656 N. BEAL PARKWAY
FORT WALTON BEACH, FL 32547

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *William K Jr*

Signature, typed or printed name of registered agent and title (if any) (NOTE: Registered Agent signature required when reissuing)

4/30/04

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

U00000155097

05/05/04 30023-008 150.00

10. OFFICERS AND DIRECTORS

| | |
|--|---|
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | D SCRUGGS, KIM Y 656 N. BEAL PARKWAY FT. WALTON BEACH, FL 32547 |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | D SCRUGGS, WILLIAM K JR 656 N. BEAL PARKWAY FT. WALTON BEACH, FL 32547 |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | |
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**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *William K Jr*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/04

Date

588684270

Daytime Phone #